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APPLICANTS

Michael L. Blomquist, Andover, MN;

** CONTINUING DATA *****

none one

** FOREIGN APPLICATIONS *****

none one

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MN	SHEETS DRAWING 32	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	EXAMINER'S SIGNATURE <i>Laura M. Hanne</i>	INITIALS <i>SMH</i>		
Verified and Acknowledged				

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TITLE

Programmable medical infusion pump displaying a banner

FILING FEE RECEIVED 954	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: Best Available Copy	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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